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ABSTRACT

In recent years the pace has been accelerating by which changes in the Diagnostic and Statistical Manual of Mental Disorders (DSM) systems are made. Revisions occur before extensive empirical knowledge can be drawn upon to guide these changes. For substance use disorders, the criteria have undergone changes from DSM-III to DSM-III-R, and from DSM-III-R to DSM IV. The extent and impact of these revisions have not been formally investigated in an adolescent population. This study compared the three DSM systems in an adolescent clinical sample with respect to how youth were sorted into alcohol diagnostic groups and in terms of their relative concurrent validity. Adolescents (N=130) receiving drug abuse assessments at an outpatient evaluation clinic participated in the study. Subjects received ratings on alcohol and cannabis diagnostic symptoms, recent (past 12 months) drug use frequency, depth of addiction, and recommendation for level of drug treatment. Analysis indicated: (1) the DSM-III-R and DSM-IV have a broader, more inclusive definition of alcohol use disorders than DSM-III; (2) DSM-IV has a broader definition of abuse and a narrower definition of dependence than DSM-III-R; (3) the validity data indicate that all three DSM systems are comparably related to alternate measures of problem severity; and (4) the results were replicated when subjects were analyzed according to their cannabis use diagnoses. (ABL)

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Center for Adolescent
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A Comparison of Various DSM Criteria for Alcohol Use Disorders in Adolescents

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Abstract

Three criteria for alcohol use disorders (DSM-III, DSM-III-R, and DSM-IV, proposed) were compared in 130 adolescents receiving drug abuse assessments. An analysis of the distribution of subjects indicated that both the DSM-III-R and DSM-IV criteria are broader than the DSM-III, and that the DSM-IV produces a broader definition of abuse and a narrower definition of dependence than the DSM-III-R. The concurrent validity analysis indicated that all three systems yielded comparable validity coefficients.

Introduction

In recent years, the pace has been accelerating by which changes in the DSM systems are made. Revisions occur before extensive empirical knowledge can be drawn upon to guide the changes. For substance use disorders, the criteria have undergone changes from DSM-III to DSM-III-R, and from DSM-III-R to DSM-IV. The extent and impact of these revisions have not been formally investigated in an adolescent population.

The study compares the three DSM systems in an adolescent clinical sample with respect to how youth were sorted into alcohol diagnostic groups and in terms of their relative concurrent validity.

Method

One-hundred and thirty adolescents receiving drug abuse assessments at an outpatient evaluation clinic in St. Paul, Minnesota participated in the study. Subjects had been referred for assessments by local schools or the juvenile court. Subjects received ratings on alcohol and cannabis diagnostic symptoms, recent (past 12-months) drug use frequency, depth of addiction, and recommendation for level of drug treatment. Diagnostic symptom ratings were based on results from a structured diagnostic interview (ADI; Winters and Henly, 1992); drug use frequency and depth of addiction were obtained from a self-report questionnaire (PEI; Winters and Henly, 1989); and drug treatment recommendations were based on consensus clinical judgements. The diagnostic interviewers were blind to scores on the other three variables.

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Table 1

Sample Characteristics (N=130)

Age	Percent
12-15	42.3
16-18	57.7
Male	63.8
Female	36.2
African American	4.6
American Indian	5.4
European American	86.9
Mexicano/Latino/Chicano	3.1

Table 2

Comparison of Sample Changes Between the Alcohol Groups

DSM-III-R

DSM-III	No Dx	Abuse	Dependence	
No Dx	81	11	5	97 (74.6%)
Abuse	0	1	9	10 (7.7%)
Dependence	0	3	20	23 (17.7%)
	81 (62.3%)	15 (11.5%)	34 (26.2%)	130

DSM-IV

DSM-III	No Dx	Abuse	Dependence	
No Dx	81	16	0	97 (74.6%)
Abuse	0	10	0	10 (7.7%)
Dependence	1	0	22	23 (17.7%)
	82 (63.1%)	26 (20.0%)	22 (16.9%)	130

		DSM-IV			
		No Dx	Abuse	Dependence	
DSM-III-R	No Dx	76	5	0	81 (62.3%)
	Abuse	6	7	2	15 (11.5%)
	Dependence	0	14	20	34 (26.2%)
		82 (63.1%)	26 (20.0%)	22 (16.9%)	130

TABLE 3
VALIDITY COEFFICIENTS FOR THE DSM-III ALCOHOL GROUPS

	12-Month Alcohol Frequency	Problem Severity Scale	Treatment Referral
DSM-III	.51	.55	.31
DSM-III-R	.50	.59	.34
DSM-IV	.49	.55	.31

Results

- On the basis of comparing sample distributions between the DSM alcohol groups...

  a) DSM-III-R and DSM-IV have a broader, more inclusive definition of alcohol use disorders than DSM-III. Averaging across DSM-III-R and DSM-IV, 37.3% of the subjects received a substance use disorder diagnosis, while 25.4% received a substance use disorder diagnosis with DSM-III.

  b) DSM-IV has a broader definition of abuse and a narrower definition of dependence than DSM-III-R. Based on DSM-IV, 20.0% had alcohol abuse and 16.9% had alcohol dependence ratings; for DSM-III-R, the percentages were 11.5% (abuse) and 26.2% (dependence).

- The validity data indicate that all three DSM systems are comparably related to alternate measures of problem severity.

- The results were replicated when subjects were analyzed according to their cannabis use diagnoses (data not shown).

Conclusions

- DSM-IV may be more appropriate for adolescent populations because it has a broader definition of abuse and a narrower definition of dependence than its predecessor, DSM-III-R.

- However, because DSM-IV maintains a relatively broad definition of substance use disorders, the validity of the minimum criteria for substance use disorders is still a relevant question for adolescent researchers.

- It would be ideal to longitudinally test the predictive validity of the various DSM groupings.

- Study limitations include: some subgroups had small sample sizes; the client was the sole informant for the diagnostic ratings; and little is known how to best measure substance use disorders in adolescents.

Contact...

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